EDN-HE (11) 1(3)2015-SIS Directorate of Higher Education, Himachal Pradesh Shimla-1

Phone No. 0177-2653120, 2653575, Ext. 245, Fax: 0177-2812882

E-mail: dir.edu@rediffmail.com, statbr@rediffmail.com

Dated Shimla-171001, the

6-HOctober, 2015

To

The Registrar/ Pri	ıncıpaı,		

District \_\_\_\_\_ Himachal Pradesh.

Subject: - Submission of Numerical Data for the year 2015-16 (as on 30.09.2015)

Sir.

As you know that this Directorate collects Numerical Data as on 30<sup>th</sup> September every year from all the Institutions of Higher Education of the State. The Numerical Data for the year 2015-16 (as on 30.09.2015) has now become due from all the institutions.

You are, therefore, requested that this Data for the year 2015-16 (as on 30.09.2015) may kindly be supplied to this Directorate on the enclosed Performa by 31<sup>st</sup> October, 2015 positively. You may also submit this data through fax No. 0177-2812882 (attention to Statistics Branch) or on our e-mail address.

Please treat it most urgent.

Encls: - As above

(Dr. Amar Dev)

Addl.Director of Higher Education (C)

Himachal Pradesh.

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## FORMAT FOR DATA COLLECTION FOR INSTITUTIONS OF HIGHER EDUCATION NUMERICAL DATA FOR THE YEAR 2015-16 AS ON 30-09-2015)

Name	of Institution (w	ith full a	addres	s):- ·						-			
Year of	f Establishment	:-											
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Sr. No.	Course/Class	Boys	Girls	Total	Roys	Girls	Total	Boys	Giris	Total	Roys	Girls	Total
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Note:- Class-wise information may be given for each stream ( Arts, Science, Commerce & any other for Graduate level courses and subject & Class-wise for P.G. Level courses)

***	Name of the Course / Class		Number of disabled students (All Communities)												
Sr. No.		Visually Impaired		Hearing Impaired		Orthopaedica Ily Impaired		Mentally Challenged		Others		Total			
		Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls		
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	Name of the Course / Class		Number of disabled students (Scheduled Caste)												
Sr. No.		Visually Impaired		Hearing Impaired		Orthopaedica Ily Impaired		Mentally Challenged		Others		То	tal		
		Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls		
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Name of the Course / Class		Number of disabled students (Scheduled Tribe)												
	Visually Impaired		Hearing Impaired				11.000		Others		Total			
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls		
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		Name of the Impa	Name of the Impaired	Visually Hea	Visually Hearing Name of the Impaired Impaired	Visually Hearing Orthon Name of the Impaired Impaired Illy Imp	Visually Hearing Orthopaedica Name of the Impaired Impaired Ily Impaired	Visually Hearing Orthopaedica Mer Name of the Impaired Impaired Ily Impaired Challe	Name of the Course / Class	Name of the Course / Class Boys Girls Boys	Name of the Course / Class	Name of the Course / Class		

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		All Communities			Sch	Scheduled Caste			eduled			OBC	
Sr. No.	Designation	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Tota
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	No.of Hostels		No. of Hostellers												
Hostels for		All Communities			Scheduled Caste			Scheduled Tribe			OBC				
		Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total		
Boys			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												
Girls					- 12										
Total															

Certified that the information given in the form is correct as per record.

Signature of Head of Institution with Stamp